



PATENT APPLICATION FEE DETERMINATION RECORD

| | | | | | | | | | Application or Docket Number | | | | |
|---|--|---|------------|-----------------|-------------------------------------|------------------|------|--------------|------------------------------|------------|-------------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 1996 | | | | | | | | 1 | 72 | + | 05 | 1 | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | | |
| FOR N | | | BER FILED | | NUMBER EXTRA | | | RATE | FEE | | RATE | FEE | |
| BASI | C FEE | | | | | | | | 385.00 | OR | | 770.00 | |
| тот | AL CLAIMS | 1 | minus 20 = | | * | |] x | \$11= | | OR | x\$22= | | |
| INDE | PENDENT CL | AIMS | minus 3 = | | * | | x40= | | | OR | x80= | | |
| MUL. | TIPLE DEPEND | DENT CLAIM PRI | ESENT | | | +130 | | .130- | _ | | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | الأوضي عرب | OR OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHE | R THAN | |
| | i | (Column 1) | | | olumn 2) | (Column 3) |) | SMAI | L ENTITY | OR | SMALL | ENTITY | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NI PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | · | = | x | \$11= | | OR | x\$22= | | |
| | independent | * | Minus | *** | | = |] [, | <40= | | OR | x80= | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |] [+ | 130= | | OR | +260= | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | L | OR , | TOTAL ADDIT. FEE | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | · | HI NU PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | x\$ | | | OR | x\$22= | | |
| | Independent | * | Minus | *** | | = | , | ×40= | | OR | x80= | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 130= | | OR | +260= | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | L E | OR | TOTAL ADDIT. FEE | | |
| ENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NI PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | ſ | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| AMENDMENT | Total | * | Minus | ** | | = | X | \$11= | | OR | x\$22= | | |
| | Independent | * | Minus | *** | | _ | , | <40= | | OR | x80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= | | | | | | | | | OR | +260= | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |